

## MEETING MINUTES

<b>Project Name:</b> IPRS	<b>Doc. Version No:</b> 1.0	<b>Status:</b> Final
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**Meeting Name:** IPRS Core Team Meeting  
**Facilitator:** Eric Johnson, DMH  
**Scribe:** Chris Ganey  
**Date:** 01/23/2008  
**Time:** 10:30 – 11:30 AM  
**Location:** Wycliff – Conference Room 430

### IPRS Core Team Attendees:

Gary Imes	<b>Others:</b>
Thelma Hayter	x Cathy Bennett
x Eric Johnson	x Sandy Flores
Travis Nobles	x Paul Carr
Cheryl McQueen	x Theresa Diana
Joyce Sims	Chris Ferrell
x Jamie Herubin	x Rick Kretschmer
x Mike Frost	Deborah LeBlanc
Myran Harris	Tim Sullivan
	x Chris Ganey

### Attendees:

x Alamance-Caswell	x Johnston
x Albemarle	x Mecklenburg
x Catawba	x Onslow-Carteret
x Centerpoint	x OPC
x Crossroads	x Pathways
x Cumberland	x Sandhills
x Durham	x SE Center
x Eastpointe	x SE Regional
x ECBH	Smoky Mountain
x Five – County MHA	x The Beacon Center
Foothills	x Wake
x Guilford	x Western Highlands

Attendees:

Item No. Topics

1. Roll call
2. Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. **Please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3. Upcoming Check-writes (cut-off dates) – Jan. 31 (Feb. 4), Feb.7. Feb. 14, Feb. 21
4. Agenda items
  - Beta Test (NPI) Requirements Review
    - 100 records/LME/submission; Format test; full cycle run, 835
    - **Update schedule termination: TBD**
  - IPRS Questions or Concerns
  - MMIS Updates- Theresa Diana
    - H-Code bypass for Medicare
    - Reminder...NCECS Web Tool updates:
      1. Taxonomy fields
      2. Address fields

These updates are located in the billing provider section and R/A provider section. Please note these are new required fields; refer to the January 2008 General Medicaid bulletin at: <http://www.ncdhhs.gov/dma/bulletin/0108bulletin.htm>
5. DMH and/or EDS concluding remarks
  - a. For **North Carolina Medicaid** claim questions / inquires please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.
    - i. Physician phone analyst (i.e. Independent Mental Health Providers)-1
    - ii. Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 2
6. Roll Call Updates

Next Meeting: January 30, 2008

For assistance with IPRS claims, adjustments, R2Web, accessing application, etc.  
Call the IPRS Help Desk – 1-800-688-6696, option 4 or 919-816-4355

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M-F, 8 a.m.-4:30 p.m., excluding holidays.  
IPRS Question and Answer email address – [iprs.qanda@ncmail.net](mailto:iprs.qanda@ncmail.net)

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	Topics
1.	<p><b><u>Checkwrites</u></b></p> <p>(Eric Johnson)- Reviewed upcoming checkwrite dates as they are written on the agenda and explained that there are no more checkwrites this month. January 31<sup>st</sup> is the checkwrite cutoff for the checkwrite dated February 4th. Asked if there are any questions regarding the past checkwrite?</p>
2.	<p><b><u>Agenda Items</u></b></p> <p>(Eric) – No new agenda items.</p>
3.	<p><b><u>Beta Test (NPI)</u></b></p> <p>(Eric Johnson)- Encouraged the need for the LME's to use the NPI/Beta Testing. It would help them to get familiar with the NPI and allow them to respond to any NPI issues early. Stated that there are some LME's utilizing the testing period and that we are receiving their information and it has been beneficial. It was also explained that if there are any issues or questions with starting the Beta Testing, to contact us and let us know and we may be able to help out. Asked if there are any questions about the Beta Testing?</p>
4.	<p><b><u>IPRS Related Questions</u></b></p> <p>(Eric Johnson)- Any questions regarding IPRS?</p> <p>Q: (Faye/Mecklenberg) – Explains that she has submitted claims with the NPI and that they replaced the LME number with the NPI and received a number of denials. She asks if we are matching the NPI on the website to the NPI on the claim...in order to give feedback if it's the right information?</p> <p>A: (Eric)- Asks what website she is referring to?</p>
5	<p>Q: (Faye/Mecklenberg) - We had to enter the NPI numbers for all the IPRS providers on the IPRS website (browser screens)...</p> <p>A: (Eric) – Responds yes that is the NPI that we are considering in the mapping solution and confirms that she is talking about the IPRS browser when she is referring to the IPRS website.</p> <p>Q: (Faye/Mecklenberg) – States, ok, so if it did not match with what she has in her system then she needs to double check the information and make sure the information is the same.</p> <p>A: (Eric) – Responds, yes that's right. Make sure that the legacy number that you are expecting to represent with the NPI is in both systems as well as what is used on the claim.</p> <p>Q: (Faye/Mecklenberg) – Thank you.</p> <p>(Eric)- Are there anymore IPRS related questions?</p>

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6	<p>(No Response)</p> <p><b><u>MMIS Update</u></b></p> <p>(Eric Johnson)- Theresa Diana is going to give us an MMIS Update.</p> <p>(Theresa Diana)- H code update from last week. H0004, H0001 and H0005 should be bypassing Medicare. If there are denials, then those claims can be resubmitted. Also states that the Raleigh NPI seminar is completely full and anyone wishing to attend must register for one of the other locations.</p> <p>Q: (Beth/Pathways) – Do we know an effective date or is that by an effective date of service?</p> <p>A: (Theresa) – I believe it is just date of processing, you can just resubmit the claim.</p> <p>Q: (Beth/Pathways) – Ok so it doesn't matter about DOS. Ok, thank you.</p> <p>A: (Theresa) – Right.</p> <p>Q: (anonymous) – Does that not include H0031 as well?</p> <p>A: (Theresa) – No, it does not.</p> <p>Q: (Tom/Western Highlands) – Does the H0004 include the modifiers?</p> <p>A: (Theresa) – Yes, all the codes, those 3 codes are with the modifiers.</p> <p>Q: (Kelly/Durham) – Is there a reason why H0031 was not included?</p> <p>A: (Theresa) – Not to my knowledge, no.</p> <p>Q: (Kelly/Durham) – Could we get some follow up on that because the same rules would apply?</p> <p>A: (Eric) – We did ask about that originally, and we had followed up on our original question and there was no statement made (from DMA). But until we hear more, we can't say if that's going to happen. It probably has to be taken into consideration with the coding change. We will let you know if we hear something, and I will ask DMA the question again.</p> <p>Q: (Kelly/Durham) – Ok, thanks, because that's just ridiculous to not include that code. So if you could just let us know, it would be great.</p> <p>(Eric) – Are there any other Medicaid questions?</p> <p>Q: (Terry/Eastpointe) – I just want to verify for any provider directly billing that they need to include the NPI and legacy number, correct?</p> <p>A: (Theresa) – Correct</p> <p>Q: (Terry/Eastpointe) – Thank you</p> <p>(Eric) – Other questions? If there are no other questions we will conclude this phone call.</p>
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	<p>Q: (Susan/Centerpoint) – the NPI and the legacy are required for the provider?</p> <p>A: (Eric) – That’s right. If we’re talking about direct enrolled, yes.</p> <p>Q: (Susan/Centerpoint) – that would be in 2310B, is that correct?</p> <p>A: (Eric) – Are you speaking about the loop, 2310?</p> <p>Q: (Susan/Centerpoint) – Yes</p> <p>A: (Eric) – I’m not exactly sure. I guess we’re going to ask you to send that question in to IPRS and please be specific because there seems to be more than one way that this question can be answered and we want to answer it correctly. Can you send that to Q&amp;A?</p> <p>Q: (Susan/Centerpoint) – Uh, sure but according to the IPRS reporting requirements that I just pulled off the web yesterday, it says, that an additional reference....2310B... cannot be submitted....so I don’t know where to put this?</p> <p>A: (Eric) – We’re still going to ask you to send that to Q&amp;A, because you’re quoting the IPRS specs, but I thought the original question was in regards to Medicaid.</p> <p>Q: (Susan/Centerpoint) – Alright.</p> <p>A: (Eric) – Can you send that in?</p> <p>Q: (Susan/Centerpoint) – Sure</p> <p>A: (Eric) – Thanks.</p> <p>(Eric) – If there are no more questions we are going to conclude the call.</p>